PTO/S8/06 (12-04)
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	A		ICATION AS FILED - PART I (Cotumn 1) (Cotumn 2)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
•	FOR	NUMB	ER FILED	14 NUMBE	ER EXTRA	RATE (S)	FEE (\$)	ŀ	RATE (\$)	_FEE (\$)
BAS	SIC FEE FR 1.16(a), (b), 67	ėn —						<b> </b>		7900
SEA	RCH FEE CFR 1.16(N), (i), or (i						•	1		7
EXA	MINATION FEE							1		
_	CFR 1.16(0), (p), or (	q))				1		ł	- m	<del>                                     </del>
(37	CFR 1.16(i))	14	minus 20	0		× 25 =		OR	x 60 .	
	EPENDENT CLA CFR 1.16(h))	MS 3	minus 3	• •		x /00 =		]	× 200 =	
FEE	PLICATION SIZE E CFR 1.16(s))	sheets of is \$250 (3 additional	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
MUI	LTIPLE DEPEND	ENT CLAIM PRES	ENT (37 C	FR 1.16(j))		1800			360	1.
	he difference in column 1 is less than zero, enter "0" in column 2,							1	JOTAL	200
-	···· - APPL			(Column 1) (Column 2) (Column 3)						
	APPL			(Column 2)	(Column 3)	SMALL E	NTITY	OR-	OTHER SMALL	
A TA	9/8/08			(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL E	ADDI- TIONAL FEE (\$)	OR		
	9/1	(Column 1) CLAIMS REMAINING AFTER	Minus	HIGHEST NUMBER PREVIOUSLY	PRESENT	100	ADDI- TIONAL	OR	SMALL	ADDI- TIONAL
	9/8/08	(Column 1) CLAIMS REMAINING AFTER	Minus Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (S)	ADDI- TIONAL	OR	RATE (5)	ADDI- TIONAL
ENDMENT	70tal (37 GR 1.15(3)) Independent (37 GR 1.15(1))	(Column 1) CLAIMS REMAINING AFTER	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (S)	ADDI- TIONAL		RATE (S)	ADDI- TIONAL
	Total (37 GR 1.16(1)) Independent (17 GR 1.16(h)) Application Siz	(Column 1)  CLAIMS REMAINING AFTER AMENDMENT  (C)  (C)  (C)  (C)  (C)  (C)  (C)  (C	Minus 6(s))	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	x 25 = x 100 =	ADDI- TIONAL	OR	RATE (S)	ADDI- TIONAL
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B AMENDMENT	Total (37 GR 1.16(3)) Independent (17 GR 1.16(3)) Application Siz FIRST PRESENT	(Column 1)  CLAIMS REMAINING AFTER AMENDMENT  JULI  Be Fee (37 CFR 1.1	Minus 6(s))	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (S)  x 25 = x 100 = 180  TOTAL	ADDI- TIONAL	OR OR	SMALL  RATE (5)  x 50 =  x 200 =   360  TOTAL	ADDI- TIONAL
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B AMENDMENT	Total (37 CFR 1.16(1)) Application Size FIRST PRESENT  Total (37 CFR 1.16(1)) Independent (17 CFR 1.16(1)) Independent (17 CFR 1.16(1))	(Column 1)  CLAIMS REMARNING AFTER AMENDMENT  Se Fee (37 CFR 1.1  ATION OF MULTIPL  (Column 1)  CLAIMS REMAINING AFTER	Minus  6(s))  E DEPENDE  Minus  Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR  " Z 1 " "	PRESENT EXTRA	RATE (\$)  x 25 =  x 100 =   180  TOTAL ADD'L FEE  RATE (\$)	ADDI- TIONAL FEE (\$)	OR OR OR	RATE (S)  x 50 =  x 200 =  TOTAL ADD'L FEE  RATE (S)	ADDI- TIONAL FEE (S)
AMENDMENT	Yotal (37 GFR 1.16(h)) Application Siz  FIRST PRESENT  Total (37 GFR 1.16(h)) Independent (37 GFR 1.16(h)) Application Siz	(Column 1)  CLAIMS REMAINING AFTER AMENDMENT  Fee (37 CFR 1.1  ATKING OF MULTIPL  (Column 1)  CLAIMS REMAINING AFTER AMENDMENT	Minus 6(s)) E DEPENDE Minus Minus Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR  " 2 10 "	PRESENT EXTRA	RATE (\$)  x 25 = x 100 =  180  TOTAL ADD'L FEE	ADDI- TIONAL FEE (\$)	OR OR OR OR	RATE (S)  x 50 =  x 200 =  TOTAL ADD'L FEE  RATE (S)	ADDI- TIONAL FEE (S)  ADDI- TIONAL

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to potain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

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